LONG TERM SUPPORT COMMITTEE MEETING TUESDAY, JULY 3, 2012 -- 1:00 P.M.



ROCK COUNTY JOB CENTER 1900 CENTER AVENUE ROOM D/E JANESVILLE, WI 53546

<u>AGENDA</u>

1.	Call	to	Order	and	Welcome

- 2. Approval of Agenda
- 3. Approval of Minutes of May 1, 2012 Meeting*
- 4. Citizen Participation
- 5. Financial/Statistical Information:
 - A. Human Services*
 - a. LTS Updates & Budget Status
 - b. CLTS Waiver Program
 - B. Developmental Disabilities*
- 6. Old Business:
 - A. ADRC Update
 - B. Success stories
- 7. New Business
 - A. Approval of Amended Cost Share Policy
- 8. Committee Member Comments
- 9. Next Meeting dates –
 September 4
 November 6
- 10. Adjourn

^{*} Denotes Attachment

Long Term Support Update

1) LTS Staff:

- -Jacob Dunn resigned from LTS May 29, 2012 and Yvonne Campbell will retire on June 29, 2012. Ms. Campbell has worked for the county for over 30 years. Both positions are on hold to fill until the county decides when it will open the ADRC.
- -Effective July 9, 2012, there will be a new phone/intake worker, Diane Jones. Ms. Jones has assisted LTS on a limited-term basis in the past and is familiar with this position and the division as a whole.
- The first LTS update has been submitted to County Administration for the County Board updates page.
- 3) Due to the waitlist status, LTS staff continue to tap into the COP High Cost funds for purchases over \$1000. YTD we have received approval for funding for 9 clients.

4) Cases with Funding

Cases with runding			r	1	T == 2.4
Program	Total	Number	Average	}	Waiting
-	Individuals	Currently	Daily	CBRF %	List as of
	Served 2012	Open	Census	as of	6/20/12
		6/20/12	4/2012	4/30/12	
COP Assessments	134	NA	NA	NA	NA
COP Plans	111	NA	NA	NA	NA
COP Services	128	109	106	60%	44
COP-W	148	133	133	38.1%	
CIP-II	302	273	265	33.2%	136
NH Diversion	6	5	NA	NA	NA
CRI	17	15	NA	NA	4
AFCSP	24	12	NA	NA	10
BCA/Tax Levy	37	23	NA	NA	42

4) Significant Proportion report (5/31/12):

	<u> Keguirea</u>	<u>Actual</u>
Mentally Ill	6.6%	20.5 %
Physically Disabled	6.6%	21.8 %
Elderly	57%	57,6 %

Key;

COP- Community Options Program (100% State General Purpose Revenues)

<u>COP-W</u> = Community Options Program — Waiver (Medical Assistance Waiver program using State GPR to draw down Federal Revenues, unlimited slots as long as you have State or local match)

<u>CIP-II</u> = Community Integration Program (Medical Assistance Waiver program using State GPR to draw down Federal Revenues)

NHD = Nursing Home Diversion Program (Medical Assistance Waiver program using State GPR to draw down Federal Revenues-specifically for those in imminent risk of moving to an institution.)

<u>CRI</u> = Community Relocation Initiative (Medical Assistance Waiver program using State GPR to draw down Federal Revenues-specifically to move individuals out of nursing homes.)

AFCSP= Alzheimer's Family Caregiver Support Program (100% State Revenues, local annual cap of \$2,000 per person)

BCA/Tax Levy = Basic County Allocation and Tax Levy to designate services that are eligible for timited BCA and interchangeable with tax levy used for match and overmatch.

Prepared by Jennifer Thompson 6/20/12

ROCK COUNTY HUMAN SERVICES DEPARTMENT LONG TERM SUPPORT BUDGET STATUS REPORT

01/01/12 - 4/30/12

EXPENSES

ADULT AND ELDERLY

& SENSORY DISABLED

PHYSICALLY

18,986 448 1,062 5,970 848 5,386

> 438 4,916

1,054

424 5,386

424

8,973 448

10,013

LTS PURCHASED

Supportive Home Care
Housing/Energy Assistance
Adaptive Equipment
Adult Family Home
Home Delivered Meals
Community Based Residential

12,115 20,585 32,700			
12,115 20,585	32,700		
12,115	20,585		
	12,115		

DISABLED	ADULT AND ELDERLY.	YTD EXPENSES
0	4,975	4,975
0	2,028	2,028
4,763	0	4,763
0	342	342
0	807	807
0	20,000	20,000
4,763	28,152	32,915

EXPENSES	935	8,974	37	8,346	104,876	123,168	
ADULT AND ELDERLY	935	8,974	37	8,346	98,595	116,887	
& SENSORY DISABLED	0	0	0	0	6,281	6,281	

Alzheimers Family Caregiver

Adult Day Care
Respite
Supportive Home Care
Spec. Transportation
Outreach
Community Based Residential Facility
TOTAL Alzheimers Family Caregiver

Community Relocation Initiative (CRI)

Adult Day Care
Supportive Home Care
Spec. Transportation
Adaptive Equipment
Community Based Residential Facility

Nursing Home Diversion (NHD)

Respite
Supportive Home Care
Home Delivered Meals
Community Based Residential Facility
TOTAL NHD

Community Options Program (COP)

Adult Day Care
Supportive Home Care
Housing/Energy Assistance
Specialized Transportation
Prevocational Services
Adaptive Equipment
Adult Family Home
Home Delivered Meals
Recreation/Alternative Activities
Community Based Residential Facility
Suported Employment
TOTAL COP

		,
13.507	11.776	1.731
2,080	2,080	0
664	0	664
3,711	2,644	1,067
7,052	7,052	0
EXPENSES	ELDERLY	DISABLED
YTD	ADULT AND	& SENSORY
		PHYSICALLY

SENSORY ADULT AND ELDERLY EX DISABLED ELDERLY EX DISABLED ELDERLY EX 0			 											
A	\ \frac{1}{2}	TID EXPENSES	6,535	11,555	11,489	3,302	4,732	251	67,973	1,928	345	217,453	11,607	337,170
PHYSICALLY MENTAL & SENSORY HEALTH DISABLED 6,535 10,645 3,302 0 4,732 0 66,140 1,764 1,764 1,764 1,764 1,764 1,764 1,608 6,999 4,608 6,999 248,974 23,318	CINA T II ICIA	ELDERLY	0	652	85	0	0	0	1,489	20	0	62,632	0	64,878
MENTAL HEALTH 6,535 10,645 10,801 3,302 0 251 66,140 1,764 1,764 295 144,633 4,608	PHYSICALLY SENSORY	& SEINSORT DISABLED	0	258	603	0	4,732	0	344	144	20	10,188	6,999	23,318
	FACTITAL	HEALTH	6,535	10,645	10,801	3,302	0	251	66,140	1,764	295	144,633	4,608	248,974

COP WAIVER

Adult Day Care
Respite Care
Supportive Home Care
Specialized Transportation
Adaptive Equipment
Adult Family Homes
Home Delivered Meals
Community Based Residential
Counseling/Theraputic Resources
Financial Management Services
TOTAL COP WAIVER

CIP-II

Adult Day Care
Respite
Supportive Home Care
Specialized Specialized Transportation
Adaptive Equipment
Adult Family Home
Home Delivered Meals
Community Based Residential Facility
Counseling/therapetic Resource
Financial Management Services
Day Center Services
TOTAL CIP-II

821,606	536,761	284,845
1,101	861	240
410	0	410
311,060	297,437	13,623
38,052	19,348	18,704
48,113	38,793	9,320
37,928	6,985	30,943
3,698	2,860	838
352,619	150,566	202,053
5,605	1,566	4,039
23,020	18,345	4,675
CIONITION IN		
YTD	ADULT AND ELDERI Y	& SENSORY DISABLED
		PHYSICALLY

1,388,488	875,442	513,046
2,965	0	2,965
1,732	432	1,300
5,240	820	4,420
485,793	399,838	85,955
91,833	51,258	40,575
120,689	84,119	36,570
69,495	33,106	36,389
5,146	1,493	3,653
550,500	278,508	271,992
23,225	10,518	12,707
31,870	15,350	16,520
EAFENSES	ELDERLI	DISABLED
YTD	ADULT AND	& SENSORY
		PHYSICALLY

SUMMARY			PHYSICALLY				
	ANNOAL	MENTAL	MENTAL & SENSORY	ADULT AND		YTD	
	BUDGET	HEALTH	DISABLED	ELDERLY	ALL TG'S	BUDGET	VARIANCE
BCA PURCHASED	135,000		12,115	20,585	32,700	45,000	12,300
TOTAL BOATAX LEVY	135,000	0	12,15	20,585	32,700	45,000	72,300
COP	985,925	248,974	23,318	64,878	337,170	328,642	(8,528)
COP CASE MANAGEMENT	8,991				68	2,997	2,908
COP PROVIDED ASSESS/PLANS	77,765				25,922	25,922	(0)
COP ADMINISTRATION	74,886				24,962	24,962	0
TOTALCOP	1,147,567	248,974	23,318	64,878	388,143	382,522	(5,621)
COP-WAIVER	2,287,970		284,845	536,761	821,606	762,657	(58,949)
COP-WAIVER CASE MANAGEMENT	428,571				159,740	142,857	(16,883)
COP-WAIVER ADMINISTRATION	204,471				66,027	68,157	2,130
TOTAL COP-WAIVER		0	284,845	536761	8/9/4701U	973,671	(73,702)
CIP-II	4,729,390		513,046	875,442	1,388,488	1,576,463	187,975
CIP-II CASE MANAGEMENT	992,340				355,677	330,780	(24,897)
CIP-II ADMINISTRATION					119,657	143,556	23,899
TOTALCIPAL	6,152,398		513,046	875,442	1,863,822	2,050,799	186,977
ALZHEIMER'S	58,040	0	4,763	28,152	32,975	19,347	(13,628)
ALZHEIMER'S CASE MANAGEMENT	14,140		0	0	3,535	4,713	1,178
THE TAKEN							

10,428,157

GRAND TOTAL PURCHASED

ROCK COUNTY HUMAN SERVICES DEPARTMENT LONG TERM SUPPORT PROGRAM WAITING LISTS June 25, 2012

Program	Jan	Feb	War	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Average
AFCSP2010	19	19	18	18	19	18	14	14	15	15	15	17	17
AFCSP2011	18	18	14	12	6	œ	6	6	∞	10	12	12	12
AFCSP2012	13	12	13	10	11	6							11
BCA2010	50	52	51	50	8	47	48	49	46	45	48	47	49
BCA 2011	47	46	45	4	45	46	46	46	43	42	40	42	4
BCA 2012	43	42	43	41	41	42							42
COP2010	59	29	102	2.9	51	53	32	36	35	40	44	45	50
COP2011	39	36	35	33	33	31	33	41	40	41	46	47	300
COP2012	41	40	45	44	45	48		-	:				44
WAIVER2010	144	153	126	125	87	80	52	57	33	30	35	32	80
WAIVER2011	30	29	28	29	26	25	23	17	17	27	22	26	25
WAIVER2012	37	34	57	11	123	144						•	262

TOTUNDUP2010 266	266	278	254	249	194	186	136	147	122	122	134	131	185
TOTUNDUP2011	123	121	117	112	113	106	108	112	108	117	118	124	115
TOTUNDUP2012	131	125	154	71	203	226							152

cc: Jennifer Thompson Steve Hare Jennifer Anselmi LTS Committee

Employee Retirement

Yvonne Campbell – Human Services – June 29, 2012 Mary Frat – Rock Haven – July 6, 2012 Judy Remer - Rock Haven – July 6, 2012 Debra Sather – Developmental Disabilities – July 13, 2012 Dave Sleeter – 911 Communications Center – July 15, 2012

Note: When you fill out the white, half sheet per diem please leave the bottom line open for the County Board Chair to sign off on. If you need the Committee Chair to sign off on a per diem, have them initial after your name or on the line for attending meeting lasting longer than 4 hours. New per diem sheets will be available for you shortly.

Any Supervisor who finds himself/herself near the Courthouse on a Friday around 2:00 P.M. may stop in and pick up their weekly packet.

The Human Services-Long Term Support (LTS) division has received nine COP High Cost Funding awards in the last 6 months. These awards equate to over \$52,000 in additional funds for frail elders and physically disabled individuals in the community. Due to the lengthy wait list for current funds, LTS staff have pursued these additional dollars so that individuals do not have to wait for needed items or modifications. Awards have been granted for ramps, vehicle modifications, an electric wheelchair, a stair lift, and a bathroom remodel. LTS staff have done an excellent job submitting these requests on behalf of their clients; thereby obtaining necessary services that they would otherwise have to wait for.



Happy Birthday this month to Supervisors

<u>June</u> Bostwick - 6/28



ROCK COUNTY, WISCONSIN



Developmental Disabilities Board P.O. Box 2133 Janesville, WI 53547-2133 (608)757-5050 Fax (608)758-8482

TO:

Members of the Rock County Long Term Support Committee

FROM:

John Hanewall, Director

Rock County Developmental Disabilities Board

DATE:

June 21, 2012

RE:

April 2012 COP Expenditures

The following are the COP expenditures and data as of April 2012:

CIP 1A/COP Match	CIP 1B/COP Match	COP 2012
2012 Budget	2012 Budget	Budget Amount
\$107,700 +	\$730,667 =	\$838,367

CIP 1A/COP Match as of April 2012:

\$23,773

Number of Consumers being served in CIP 1A/COP: 3

CIP 1B/COP Match as of April 2012:

\$204,496

Number of Consumers being served in CIP 1B/COP: 40

Waiting List:

Currently, there are 283 consumers on the COP waiting list. This reflects a decrease of 7 consumers from April 20, 2012.

Prepared by:

Joanne Jones-Financial Supervisor

Rock County DD Board

ROCK COUNTY HUMAN SERVICES DEPARTMENT POLICY AND PROCEDURE MANUAL

SECTION:

600 LONG TERM SUPPORT

POLICY/PROCEDURE NO. 601

SUBJECT:

TITLE:

Cost Share Cases

- 1) Whenever a Long Term Support case involves a "Cost Share," and the client's portion of the cost share is being paid to a Supportive Home Care Contractor, it is necessary to complete the Supportive Home Care/Chore Agreement (LTS-001) in such a way to clearly indicate the dollar amount that will be the client's responsibility. one of their contract providers, the following must be completed:
 - Complete the Rock County Human Services Department Social Service Automatic Payment Authorization (LTS-011) in the following manner: by indicating the dollar amount—less the cost share.

In the "Amount" space . . . The total amount of the service package based on a five-week month minus the client's cost share.

- Send an email to the supervisor indicating the client name, the amount of cost share, and when it will begin.
- If the cost share is being sent directly to the Supportive Home Care agency, cComplete the Supportive Home Care Agreement by indicating:

The complete package of services being provided by the provider agency.

The complete work schedule of the package of services. Also indicate in this section the total dollar amount of the client's cost share. This statement will give documentation in writing to the client, the provider, as well as for our own files of the client's dollar obligation.

- 2) When the Department is going to be billing the client directly, the worker needs to complete the Human Services LTS Cost Share Billing Authorization (LTS-030).
 - Indicate whether this authorization is an initial submission, a change or stop billing. Complete the name, address, effective date and amount of the monthly cost share. Check the appropriate program box and sign.
 - When completed, send to the LTS account clerk and a copy to the LTS Division Manager. Accounting will bill the client the month after the month of service.
 - Send an email to the supervisor indicating the client name, the amount of cost share, and when it will begin

At a minimum, every three months monitor and document in the participants file that monthly cost share payments have been paid. Participants may lose program eligibility if the cost share payment is not kept current. If the client misses a payment one month, the worker must have a conversation with the client explaining the cost share payment requirement as well as discussing their ability to pay—as there may be medical/remedial changes. The cost share must be paid in full the following month; if not, the worker must initiate closing Waiver services. The client can request a "payment plan" to catch up, however this must be approved by the supervisor and the entire cost share must be paid by the end of that calendar year.